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Michael A. Jaskolski Reg. No. 37,551

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OFFICE OF PETITION

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Carlos De La Huerga  
Serial No.: 09/247,349  
Filed: February 10, 1999  
Title: METHOD AND SYSTEM FOR AUTOMATED DATA STORAGE AND RETRIEVAL  
Art Unit: 2771  
Docket: 250591.90112

Mail Stop Issue Fee  
Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**CORRECTION OF FILING DATE**

Dear Sir:

The above-referenced patent application was initially filed on February 10, 1999. The initial Filing Receipt for this case, a copy of which enclosed herewith, indicated that the filing date in fact was February 10, 1999. Partway through prosecution of this application the Examiner began to use the incorrect filing date of May 3, 1999. Applicant requests that the filing date on the issued patent correctly reference February 10, 1999.

Please call Applicant's attorney identified below if you have any questions or require additional information to correctly identify the filing date on the issued patent.

Respectfully submitted,

CARLOS DE LA HUERGA

Date: 5-17-04

By:

Michael A. Jaskolski

Reg. No. 37,551

Attorney for Applicant

QUARLES & BRADY, LLP

411 East Wisconsin Avenue

FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/247,349	02/10/99	2771	\$1,408.00	250591.90112	30	43	6

MICHAEL A JASKOLSKI  
QUARLES & BRADY  
411 EAST WISCONSIN AVENUE  
SUITE 2550  
MILWAUKEE WI 53202-4497

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

CARLOS DE LA HUERGA, MILWAUKEE, WI.

CONTINUING DATA AS CLAIMED BY APPLICANT-

THIS APPLN IS A CIP OF 08/727,293 10/09/96  
PROVISIONAL APPLICATION NO. 60/023,126 07/30/96  
WHICH IS A CIP OF 08/871,818 06/09/97

4/20/99  
issued  
PAT 5,895,461  
PAT 5,903,889

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/02/99

TITLE

METHOD AND SYSTEM FOR AUTOMATED DATA STORAGE AND RETRIEVAL

PRELIMINARY CLASS: 707

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JUL 06 1999

DATA ENTRY BY: DILLON, LAWANDA

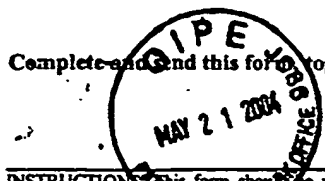
TEAM: 03 DATE: 06/28/99

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<b>Michael A. Jaskolski</b>	(Depositor's name)
<i>[Signature]</i>	(Signature)
<b>5-17-04</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/247,349	05/03/1999	CARLOS DE LA HUERGA	250591.90112	7519

**TITLE OF INVENTION: METHOD AND SYSTEM FOR AUTOMATED DATA STORAGE AND RETRIEVAL**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	05/18/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
COBY, FRANTZ	2171	707-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Quarles & Brady LLP

2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

**HyperPhrase Technologies, LLC**

**Madison Wisconsin**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies \_\_\_\_\_

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(Authorized Signature) *[Signature]* (Date) **5-17-04**

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